## FEC FORM 2

## STATEMENT OF CANDIDACY

. ,	e of Candidate (in full)							
	N DUFFY	F-0				10.0 11.1.1 550.11	('C' (' b)	
	(b) Address (number and street)			ss changed		Candidate's FEC Identification Number     H0WI07051		
(c) City,	State, and ZIP Code						lew	Amended
WA	USAU		W	I 5440	2-0538	Statement (1	N) OR	× (A)
4. Party Aff	filiation	5. Office Soug	ht		6. State & Dis	trict of Candidate		
REPUE	BLICAN PARTY	House			WI	07		
	DI	ESIGNATIO	N OF PR	INCIPAL	CAMPAIG	N COMMITTEE		
7. I hereby designate the following named political committee as my Principal Campaign Committee for the 2016 (year of election)								
NOTE: T	This designation should be	filed with the ap	propriate offi	ce listed in t	he instructions.			
` ,	e of Committee (in full) JFFY FOR CONO	GRESS						
	ess (number and street) BOX 538							
(c) City,	State, and ZIP Code							
W	AUSAU				WI	54402-0538		
	DI	ESIGNATIO	N OF OT	NED VII.	TUODIZED	COMMITTEES		
	Di				g Representativ			
8. I hereby candidad	authorize the following na	med committee,	which is NO	T my princip	al campaign cor	mmittee, to receive and ex	rpend funds or	n behalf of my
NOTE: T	his designation should be	filed with the pri	ncipal campa	nign committ	ee.			
` '	e of Committee (in full) JFFY FOR WISC	ONSIN						
	ess (number and street) BOX 9891							
(c) City,	State, and ZIP Code							
AR	LINGTON				VA	22219		
	I certify that I have ex	amined this State	ement and to	the best of	my knowledge a	and belief it is true, correct	t and complete	9.
Signature of Candidate						Date		-
SEAN DUF	FY			[Elec	tronically Filed]	02/11/2016		
						_		
NOTE: Sub	mission of false, erroneous	s, or incomplete	information n	nay subject t	he person signi	ng this Statement to pena	lties of 2 U.S.C	C. §437g.
NOTE: Sub	mission of false, erroneous	s, or incomplete	information n	nay subject t	he person signi	ng this Statement to pena	lties of 2 U.S.C	C. §437g.

FEC FORM 2 (REV. 02/2009)

(c) City, State and ZIP Code

## FORM 2S - STATEMENT OF CANDIDACY (Supplemental Page)

FEC Form 2 (Rev. 02/2003) [ ADDITIONAL ] **DESIGNATION OF OTHER AUTHORIZED COMMITTEES** (Including Joint Fundraising Representatives) I hereby authorize the following named committee, which is NOT my principal campaign committee, to receive and expend funds on behalf of my NOTE: This designation should be filed with the principal campaign committee. (a) Name of Committee (in full) DUFFY EMMER JOINT FUNDRAISING COMMITTEE (b) Address (number and street) 824 S MILLEDGE AVE STE 101 (c) City, State and ZIP Code **ATHENS** GΑ 30605 [ADDITIONAL] **DESIGNATION OF OTHER AUTHORIZED COMMITTEES** (Including Joint Fundraising Representatives) I hereby authorize the following named committee, which is NOT my principal campaign committee, to receive and expend funds on behalf of my candidacy. NOTE: This designation should be filed with the principal campaign committee. (a) Name of Committee (in full) (b) Address (number and street) (c) City, State and ZIP Code [ADDITIONAL] **DESIGNATION OF OTHER AUTHORIZED COMMITTEES** (Including Joint Fundraising Representatives) I hereby authorize the following named committee, which is NOT my principal campaign committee, to receive and expend funds on behalf of my candidacy. NOTE: This designation should be filed with the principal campaign committee. (a) Name of Committee (in full) (b) Address (number and street)